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PATENT	APF	PLIC	CAT	ION
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Attorney Docket No.	2105.2050
First Name	d Inventor or Application Identifier
WILLIAM MUTILANGI, ET	AL.
Express Mail Label No.	

	r not rearred inventor of repondation reditation			
TRANSMITTAL	WILLIAM MUTILANGI, ET AL.			
Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ASSISTANT Commissioner for Patents Box Patent Application			
Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	Washington, DC 20231 6. Microfiche Computer Program (Appendix)			
2. X Specification Total Pages 11	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			
3. Drawing(s) (35 USC 113) Total Sheets	a. Computer Readable Copy b. Paper Copy (identical to computer copy)			
4. X Oath or Declaration Total Pages 2	c. Statement verifying identity of above copies			
a. X Newly executed (original or copy)	ACCOMPANYING APPLICATION PARTS			
b. Unexecuted for information purposes	Assignment Papers (cover sheet & document(s))			
c. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]	9. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney			
i. DELETION OF INVENTOR(S) Signed Statement attached deleting inventor(named in the prior application, see 37 CFR	(s) 10. English Translation Document (if applicable)			
1.63(d)(2) and 1.33(b). 1.55. Incorporation By Reference (useable if Box 4c is checked)	11. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations			
oath or declaration is supplied under Box 4c, is considered as being part of the disclosure of the accompanying application and is hereby	12. Preliminary Amendment 13. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)			
incorporated by reference therein.				
	14. Small Entity Statement filed in prior application Statement(s) Status still proper and desired			
	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
•	16. Other:			
17. If a CONTINUING APPLICATION, check appropriate box and support of the Continuation Divisional Continuation	oly the requisite information: on-in-part (CIP) of prior application No/			
18. CORRESPO	ONDENCE ADDRESS			
X Customer Number or Bar Code Label	05514 or Correspondence address below			
NAME				
Address				
City State	Zip Code			
Country Telephone	Fax			

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	10-20 =	0	X \$ 18.00 =	\$000.00
	INDEPENDENT CLAIMS (37 cfr 1.16(b))	2-3 =	0	X \$ 78.00 =	\$000.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$260.00 =	\$000.00
			The state of the s	BASIC FEE (37 CFR 1.16(a))	\$760.00
			Total of	above Calculations =	\$760.00
talia La canada a	Reduction by	50% for filing by small er	ntity (Note 37 CFR 1.9, 1	.27, 1.28).	_
				TOTAL =	\$760.00
19. Sm a. b. c.	A small er and desire	ntity statement is enclose ntity statement was filed in ed. er claimed.	n the prior nonprovision		h status is still proper
21.	A check in the amo	ount of \$ 40.00 to cover	the recordal fee is enclo	sed.	
	e Commissioner is hereb . 06-1 <u>205:</u>	y authorized to credit ove	rpayments or charge the	e following fees to Dep	posit Account

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Elizabeth F. Holowacz		
SIGNATURE	Clinabeth J. Golowacz		
DATE	December 9, 1999		

Fees required under 37 CFR 1.16.

Fees required under 37 CFR 1.17.

Fees required under 37 CFR 1.18.

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